#### COMMONWEALTH OF VIRGINIA STATE CORPORATION COMMISSION BUREAU OF FINANCIAL INSTITUTIONS ANNUAL REPORT OF INDUSTRIAL LOAN ASSOCIATIONS FOR THE YEAR ENDING DECEMBER 31, 2007

### **GENERAL INFORMATION**

Name And Authorized Loc	N	Name And Mailing Address Of Parent Company, If Any				
Federal Identification Nun	nber (FIN)					
Mailing Address (If Differ	ent From Autho	orized)				
E-Mail Address (if availab	ole)					
Name And Title Of The C	hief Executive (	Officer Of The Asso	ociation.			
	XXX.1		( ) D (T)			
Provide The Following Inf	formation With	Respect To Loans N			Calendar Year	· 
	G014	A CER CITA		E OF LOAN	1	
CIZE OF LOANS		MERCIAL		RTGAGE		ONSUMER
SIZE OF LOANS	Number of Loans	Aggregate Dollar Amount	Number of Loans	Aggregate Dollar Amount	Number of Loans	Aggregate Dollar Amount
Up to \$ 5,000						
\$ 5,001 - \$25,000						
\$25,001 - \$100,000						
Over \$100,000						
TOTALS						
State The Range Of Interes	st Rates (APR) a	and Points Charged	During the Year	r (Highest and Lowes	st)	
_	terest Rates		Points Ch	_	,	
Commercial	iciest Raies		1 Ollits Cli	iaigeu		
Mortgage		_				
Consumer		_				
Analysis Of Delinquent A	ccounts As Of I	December 31.				
Accounts Past Due For A Period Of:		NUMBE	R	DO	LLAR AMOUNT	
One to 60 days				\$		
61 days to 90 days					\$	
More than 90 day	'S	•••••			\$	
TOTAL					\$	

# BALANCE SHEET As of December 31, 2007

## **ASSETS**

1.	Cash and due from depository institutions	\$
2. 3	Securities	
3.	Loans receivable	
	Less: Valuation reserve	
	Unearned income	
	Net loans receivable	
4.	Land and building	
5.	Equipment, furniture and fixtures	
6.	Other real estate owned	
7.	Other assets (itemize)	
8. ′	Total Assets	\$
	<u>LIABILITIES</u>	
	<u>LIABILITIES</u>	
9.	Borrowings from financial institutions	\$
10.	Borrowings from individuals	
11.	Borrowings from shareholders	
12.	Other borrowings	
13.	Total borrowed money	
14.	Accrued interest	
15.	Accrued taxes	
16.	Mortgage indebtedness and capitalized lease obligations	
17.	Other liabilities	
18.	Total Liabilities	\$
	<u>CAPITAL</u>	
	<u> </u>	
19.	Preferred stock	\$
20.	Common stock	
	Surplus	
22.	Undivided profits	
23.	Total Capital	
24.	Total Liabilities and Capital	\$

## <u>INCOME STATEMENT</u> FOR THE YEAR ENDED DECEMBER 31, 2007

1. Interest income on balances with depository institutions	\$ 
2. Interest income on securities	 
3. Interest income and fees on loans	 
4. Other income	 
5. Total income	\$ 
6. Interest expense on borrowings	\$ 
7. Interest expense on mortgage and	
capitalized lease obligations	 
8. Provisions for loan losses	 
9. Salaries and employee benefits	 
10. Expense of premises and fixed assets	 
11. Other non-interest expense	 
2. Total Expenses	\$ 
13. Net income before taxes	\$ 
14. Income tax expense	\$ 
15. Net Income	\$ 
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	
List The Names, Addresses And Telephone Numbers Of All Mortgage Brokers Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Provided for referrals.	
Pertains Only To Mortgage Or Deeds Of Trust On Virginia Residential Pr	

Individual To Be Contacted With Respect To Questions V Number):	Which May Arise From This Report (Name, Title, Address, And Tele	phone
Provide the name, title, address and <b>telephone number</b> , for respect to:	ax number and e-mail address for the individual to be contacted wi	th
(a) Scheduling Examinations	(b) Consumer Complaints	
Please list and describe, in detail, any lawsuits which were	filed against the licensee during the year.	
	AFFIDAVIT	
State of)		
County or City of)		
I,, b	eing the(Title)	
(Name of Officer of Licensee)	(Title)	
of(Na	me of Licensee)	
swear or affirm that, to the best of my information and bel statements are true.	ief, the facts in this report, including any accompanying schedules are	ıd
	·	
	Signature	
Subscribed and sworn to before me this	day of	
	Notary Public	
	Registration Number of Notary:  My commission expires:	